MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

107539812

FILING DATE

(FOR USE WITH FORM PTO-875)

APPLICANT(S)

CLAIMS														
	AS FILED		AFTER 1"AMENDMENT		AFTER 2 MAMENDMENT				AS FILED		AFTER 1"AMENDMENT		AFTER 2 ** AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
$\frac{1}{2}$	 -	 						_51					11 (12).	DEII.
3	 			-		·		52 53						
4			/					55 54						
5								55						
7	 	<u></u>	 					56						
8				7				57 58			i			
9				7			i	_ 59						
10 11		<u> </u>					ļ	60						
12							}	61 62						
13							t	63						
14 15	 							64						
16							ŀ	65 66						
17							ŀ	67						
18								68						
19 20							-	69						
21							F	70 71	·					
22								72						
23 24							ļ	73						
25					··		ŀ	74 75						
26							Ĺ	76		<u> </u>				
27 28							<u> </u>	77						
29							ŀ	78 79						
30							- 1	80						
31								81						
33							-	82 83						
34							-	84	·					
35								85						
36 37							- -	86 87						
38								88						
39								89						
40 41							.	90						
42							F	91 92						
43							t	93						
44	 							94						
45					+		-	95 96				'N .	<u>[</u>	
47							- F	97						
48								98				1 1 1		
49 50							-	99		$ \mathbf{I}$				
TOTAL			2				F	100 TOTAL				 -		
IND.		▼ [لکِ	▼		▼	L	IND.		₽ [*		4
TOTAL DEP.		+	7	-		(-		TOTAL DEP.	•	← 「	•	← 「		← [
TOTAL CLAIMS			10					TOTAL CLAIMS						
PTO - 1360	(REV. 11/04))							U.	S. DEPARTA	MENT of COM	MERCE	18%	